

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>me</i>		
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		<i>179</i>	<i>2-26-01</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	0	0	
7	0	0	
8	0	0	
9	0	0	
10	0	0	
11	0	0	
12	0	0	
13	✓	✓	
14	✓	✓	
15	✓	✓	
16	✓	✓	
17	0	0	
18	0	0	
19	✓	✓	
20	✓	✓	
21	✓	✓	
22	✓	✓	
23	✓	✓	
24	✓	✓	
25	✓	✓	
26	0	0	
27	0	0	
28	✓	✓	
29	✓	✓	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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